24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)				PAGE 1 FOR SE OF	OF 2 FORM 24/48
NAME OF COMMITTE (In Full)			FE	C IDENTIFICATION	ON NUMBER ▼
CREDO SUPERPAC			C	C00507517	
Check If 24-hour report 48-	hour report New	report X Amends repo	ort filed on 08	07	2012
Full Name (Last, First, Middle Initia	al) of Payee		5.		
Lee R. Anderson			Date 08	M / D D /	2012
Mailing Address 400 Massachusetts Ave, NW				UZ	2012
Suite 125			Amount		
City	State	Zip Code			850.00
Washington	DC	20016	Transaction	on ID : SE.7020	
Purpose of Expenditure Strategic Consulting		Category/ Type	Office Sought:	House Senate	State: FL District: 18
Name of Federal Candidate Suppo	rted or Opposed by Expend	iture:	-	President	
ALLEN B MR. WEST			Check One:	Support	Oppose
Calendar Year-To-Date Per E for Office S		6146.92	2012	for: Primary (specify)	General
Full Name (Last, First, Middle Initia	l) of Payee		Date		
Credo Mobile			M		Y Y Y Y Y
Mailing Address 101 Market Street			08	02	2012
Suite 700			Amount		
City	State	Zip Code			656.53
San Francisco	CA	94105		on ID : SE.7291	State: FI
Purpose of Expenditure Phones		Category/ Type	Office Sought:	House Senate	
Name of Federal Candidate Suppo	rted or Opposed by Expend		-	President	District: 18
ALLEN B MR. WEST			Check One:	Support	Oppose
Calendar Year-To-Date Per E		6803.45	2012	For: Primary (specify)	General
(a) SUBTOTAL of Itemized Indeper	dent Expenditures				1506.53
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
				, : = -1	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Becky Bond	(Ela:	etronically Filed!	M = M / D		Y Y
[Electronically Filed] Date 09 17 2012 Signature					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)	PAGE 2 OF 2 FOR SE OF FORM 24/48					
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼					
CREDO SUPERPAC	C C00507517					
Check If 24-hour report 48-hour report New report Amends report	t filed on 08 07 2012					
Full Name (Last, First, Middle Initial) of Payee						
Impact Dialing	Date M M / D D / Y Y Y Y Y Y Y Y Y					
Mailing Address 3543 19th Street	Amount					
City State Zip Code						
San Fracisco CA 94110	1723.79 Transaction ID : SE.7021					
Purpose of Expenditure Phones Category/ Type	Office Sought: House State: FL Senate District: 18					
Name of Federal Candidate Supported or Opposed by Expenditure:	President					
ALLEN B MR. WEST	Check One: Support Oppose					
Calendar Year-To-Date Per Election 8527.24 for Office Sought	Disbursement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial) of Payee	Date					
	M M / D D / Y Y Y Y					
Mailing Address	Annual Control					
	Amount					
City State Zip Code						
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:					
Name of Federal Candidate Supported or Opposed by Expenditure:	President					
Traine of Federal Carlandate Capported of Opposed by Exponditure.	Check One: Support Oppose					
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	1723.79					
(a) SOSTOTAL OF ROTHIZOU HIGOPOTHOCITE EXPONDITURES						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Becky Bond [Electronically Filed] Date	09 17 2012					
Signature						